

January 24, 2014

- I. **Employment is often the most powerful catalyst for recovery and change**
 - a. Benefits of employment include:¹²³⁴⁵
 - i. Creates a sense of being valued as a member of one's community
 - ii. Improves physical⁶ and mental health
 - iii. Saves the system money by reducing costly services (ER, hospitalizations, crisis services)
 - iv. Improves a person's level of economic independence
 - v. Increases social connections
 - vi. Keeps people out of the criminal justice system

- II. **Individual Placement and Support (IPS) 3x more effective than any other approach to helping people work competitively**⁷
 - a. 19 randomized controlled trials and over 100 articles and books
 - i. Successful employment outcomes despite economy, lack of transportation, rurality, and severity of symptoms
 - b. High adherence to IPS practice guidelines leads to better employment program outcomes
 - c. High fidelity to IPS practice guidelines mitigates unique challenges of local communities such as a poor economy

- III. **Reasons for low CRT employment rates are multilayered and complex**
 - a. Decreased number of Employment Staff & Benefits Counselors
 - i. FTE employment staff FY08 = **33 down to 26.5** in FY12
 - b. Small number of people receiving Supported Employment services (20-22%)
 - c. Issues common to sustainability of a best practice:
 - i. Decreased focus, enthusiasm, and resources for maintaining high fidelity services coupled with competing external priorities/pressures.

- IV. **Suggestions on how to continue to reverse this trend to previous levels of success or higher**
 - a. Employment needs to be a priority and adequately funded in each DA's CRT Program.
 - b. DMH and Designated Agencies (DA's) to look at ways to increase employment staffing capacity using existing resources.
 - c. Have DMH and DA's track number of participants in IPS supported employment services and employment rates among participants.
 - d. Continue to support employment as a performance measure in the AHS Master Grant agreements.
 - i. Key stakeholders to work together to determine needed enhancements and supports to achieve performance measures.

Employment Outcomes in Community Rehabilitation and Treatment (CRT)
House Committee on Human Services

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References

- ¹ Drake, R., Frey, W., Bond, G., Goldman, H., et al (2013). Assisting Social Security Disability Insurance Beneficiaries With Schizophrenia, Bipolar Disorder, or Major Depression in Returning to Work. *American Journal of Psychiatry* 2013; 170:1433-1441.
- ² Drake, R., Xie, H., Bond, G., McHugo, G., Caton, C., (2013). Early psychosis and employment. *Schizophrenia Research* 146 (2013) 111-117.
- ³ Bruffaerts, R., Sabbe, M, Denyttenaere, K. (2004). Effects of Patient and Health-System Characteristics on Community Tenure of Discharged Psychiatric Inpatients. *Psychiatric Services*, 55:685-690.
- ⁴ Kessell, E.R., Catalano, R.A., Christy, A., & Monahan, J. (2006). Rates of unemployment and incidence of police-initiated examinations for involuntary hospitalization in Florida. *Psychiatric Services*, 57 (10), 1435.
- ⁵ Bush, P.W., Drake, R.E., Xie, H., McHugo, G.J., & Haslett, W.R. (2009). The long-term impact of employment on mental health service use and costs. *Psychiatric Services*, 60, 1024-1031.
- ⁶ I have compiled a list of 42 research articles showing employment's benefits and unemployment's harm to one's health.
- ⁷ See site for complete list of research articles: <http://sites.dartmouth.edu/ips/>

Acronyms

AHS	Agency of Human Services
CRT	Community Rehabilitation and Treatment Program as part of community mental health center in a Designated Agency
DA	Designated Agency
DMH	Department of Mental Health
FTE	Full-time equivalent
IPS	Individual Placement and Support model of support employment (evidence-based practice for helping people with serious mental illness obtain employment of their choice)
SE	Supported Employment
VR	Vocational Rehabilitation